PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail

Mail Stop ISSUE FEE
Commissioner for Patents
P.O. Box 1450 Alexandria, Virginia 22313-1450 (571)-273-2885

			or <u>rax</u> (5)	(1)-2/3-2885			
INSTRUCTIONS: This appropriate. All further indicated unless correct maintenance fee notifications.	correspondence includited below or directed ot	for transmitting the ISS ng the Patent, advance of herwise in Block 1, by (UE FEE and PUBLICAT riders and notification of a specifying a new corre	ON FEE (if required). Imaintenance fees will be spondence address; and/o	Blocks 1 through 5 sh mailed to the current or r (b) indicating a separ	ould be completed where correspondence address as rate "FEE ADDRESS" for	
CURRENT CORRESPOND	DENCE ADDRESS (Note: Use B	lock 1 for any change of address)	Fee pap	Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.			
27488	7590 08/2	7/2007			_		
P.O. BOX 2903	& GOULD (MIC S, MN 55402-0903	ROSOFT)	Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the Un States Postal Service with sufficient postage for first class mail in an envel addressed to the Mail Stop ISSUE FEE address above, or being facsin transmitted to the USPTO (571) 273-2885, on the date indicated below.			deposited with the United class mail in an envelope above, or being facsimile te indicated below.	
				Halina Wohl-		(Depositor's name)	
			L	tala	- Wh	(Signature)	
			1	October 1, 200	7	(Date)	
APPLICATION NO.	FILING DATE		FIRST NAMED INVENTOR	ATTO	RNEY DOCKET NO.	CONFIRMATION NO.	
10/014,177	10/014,177 12/11/2001		Vij Rajarajan MS167411.2/40062.147USU		2710		
	T. T		NT OF MULTIPLE NETV	VOIR RESOURCES	Y		
APPLN, TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	NO	\$1400	\$300	\$0	\$1700	11/27/2007	
EXAMINER		ART UNIT	CLASS-SUBCLASS				
KOROBOV, VITALI A 2155		2155	709-223000				
1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).			2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys 1 Merchant & Gould P.C.				
Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.			(1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a				
☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.				
3. ASSIGNEE NAME A	ND RESIDENCE DATA	A TO BE PRINTED ON	THE PATENT (print or ty	pe)		/////////////////////////////////////	
PLEASE NOTE: Un recordation as set for	less an assignee is ident th in 37 CFR 3.11. Com	ified below, no assignee pletion of this form is NO	data will appear on the p T a substitute for filing an	atent. If an assignee is ic assignment.	dentified below, the do	cument has been filed for	
(A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)							
Microsoft Corporation Redmond, Washington							
Please check the appropr	riate assignee category or	categories (will not be pr	rinted on the patent):	Individual 🖾 Corporati	on or other private grou	p entity Government	
4a. The following fee(s)	are submitted:	41	o. Payment of Fee(s): (Plea	ase first reapply any prev	iously paid issue fee sl	hown above)	
Issue Fee	J		A check is enclosed.				
 ✓ Publication Fee (No small entity discount permitted) ✓ Advance Order - # of Copies 			Payment by credit card. Form PTO-2038 is attached. The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 13-2725 (enclose an extra copy of this form).				
- Advance Older -	# of Copies		overpayment, to Depo	sit Account Number 13.	-2725 (enclose an	extra copy of this form).	
5. Change in Entity Sta							
	as SMALL ENTITY state		☐ b. Applicant is no lon d from anyone other than t	ger claiming SMALL EN			
interest as shown by the	records of the United Sta	ites Patent and Trademark	Office.	ne applicant; a registered i	attorney or agent; or the	assignee or other party in	
Authorized Signature	Scentu	D Teadles	è.	Date <u>October</u>	⁻ 1, 2007		
Typed or printed name <u>Stanley J. Gradisar</u>			Registration No. 42,598				
This collection of informan application. Confiden	nation is required by 37 C tiality is governed by 35	CFR 1.311. The information U.S.C. 122 and 37 CFR	on is required to obtain or r	etain a benefit by the publimated to take 12 minutes	ic which is to file (and le to complete, including	by the USPTO to process) gathering, preparing, and	

submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.